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February 9, 2006

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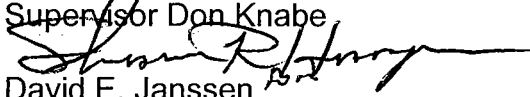
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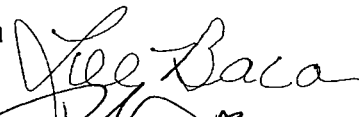
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Acting Director and Chief Medical Officer

**PRELIMINARY RESPONSE TO 2005-06 CIVIL GRAND JURY REPORT ON THE  
JAIL WARD AT LAC+USC MEDICAL CENTER**

We were recently provided with a copy of the 2005-06 Los Angeles County Civil Grand Jury's report on the Sheriff's Department's (LASD) transfers of inmate-patients to the Los Angeles County+University of Southern California (LAC+USC) Medical Center and nurse staffing issues for the LAC+USC Jail Ward.

Our staff met today to discuss the report and recommendations and this is our initial review and preliminary response to the Grand Jury recommendations. However, we will return at a later date with a more detailed review, including action steps and timeframes needed to implement the recommendations.

The Grand Jury report deals with LASD staff transfers of patients to LAC+USC and with services provided by LAC+USC for inmate-patients in the LAC+USC Jail Ward, as well as the general hospital wards. The report mentions the pay differential between nursing positions in LASD and nursing positions in the Department of Health Services (DHS), as

well as the fact that inmate patients are placed, with supervision, on general hospital wards, if there are nurse staffing shortages in the LAC+USC Jail Ward or if clinical needs dictate (placement in the general intensive care unit).

The report has four recommendations which are summarized as follows: (1) LASD should increase the use of medical personnel at Twin Towers; (2) LASD should fast-track implementation of telemedicine programs; (3) the Chief Administrative Office (CAO) should authorize DHS to hire nurses using LASD nurse classifications or allow a manpower shortage bonus for LAC+USC jail ward nurses; and (4) DHS should cease accepting inmate-patients onto general hospital wards, amongst the general public.

In response to the first recommendation, LASD concurs and has already initiated steps to increase the number of incidents wherein LASD Jail Medical personnel perform suturing. LASD suturing efforts will focus on routine, less-critical injuries, and LASD will continue to refer cases to LAC+USC with wounds on the face, neck, head, and certain extremity areas. This will require updated training for some LASD physician staff who have not performed this type of procedure in some time. LASD will establish protocols and provide training to Registered Nurse Practitioners, so they can also provide this service.

LASD indicates that the Medical Services Bureau's (MSB) new Chief Physician is supportive of increasing LASD activity in this area. LASD Personnel were recently sent to specialized training to enhance their ability to perform Incision and Drainage (IND) procedures, and MSB will continue to explore their ability to perform other types of minor surgical procedures.

The recommendation that MSB staff engage in the setting of fractures and other related orthopedic functions will require further study, due to the specialty of the involved process and the potential accompanying liability. The MSB is already aggressively pursuing the implementation of a Bureau-wide telemedicine system, which they believe will significantly enhance their ability to provide continuing quality health care. They have identified equipment and software and have made on-site visits of existing telemedicine systems already in use. Acquisition of the initial system will proceed once the County purchasing and contracting process has been completed.

In response to recommendation 2, LASD has had ongoing discussion with LAC+USC Medical Center staff, specifically as it relates to the provision of specialty clinic follow-up appointments. Dr. Marie Russell, head of Jail Ward operations at LAC+USC has partnered with LASD in the development and implementation of the DHS link to the

Each Supervisor  
February 9, 2006  
Page 3

LASD telemedicine system. Once final procurement issues are resolved, LASD anticipates the system will go online sometime during summer 2006.

With respect to recommendation 3, the CAO recognizes that Registered Nurses assigned to the LAC+USC Jail Ward work in a unique environment. A new nursing pay plan has been designed which will consider compensability for factors such as unique work characteristics. In the interim, the CAO will be working with DHS to resolve any classification and compensation issues pending the full implementation of a new nursing pay plan.

In response to recommendation 4, DHS agrees with the spirit of the Civil Grand Jury recommendations of limiting the placement of inmate patients to the LAC+USC Jail Ward. Unfortunately, there will always be a small subset of patients with special clinical needs requirements that can only be done on open wards. Examples include Intensive/Critical Care units, burn units, obstetrics, etc. DHS will work to staff up the LAC+USC Jail Ward to full capacity using appropriate adult medical surgical nurses. Further, DHS will assist LASD in their development of alternate acute care delivery strategies should LAC+USC need to go on diversion because the Jail Ward is at full capacity.

Please contact us if you have questions or need additional information.

DEJ:LDB:BAC  
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c: Executive Officer, Board of Supervisors  
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Director of Personnel